

[illegible]

My residence, post office address and citizenship are as stated below next to my name.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, C.F.R. §1.56.


<u>Serial No.</u>	<u>Country</u>	<u>Filing Date</u>	<u>Priority claimed</u>
9903282	France	March 17, 99	Yes

Y

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true ; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: 11/2/00

d



de Rome 94510-La Queue en Brie F

Residence and Post Office address : 3, rue de Rome 94510-La Queue en Brie France

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (8-96)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number

1490

First Named Inventor

Bernard Vallee

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEAT WITH TILTING SEATING SURFACE

(Title of the Invention)

the specification of which

☒ is attached hereto  
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/FR00/00585 9903282	PCT France	03/17/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Please type a plus sign (+) inside this box → ☐

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## DECLARATION

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Henry M. Bissell	19,200		
Henry M. Bissell IV	42,329		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

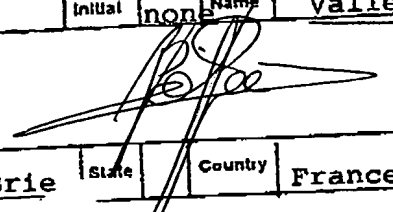
Direct all correspondence to:

Name: Henry M. Bissell  
Address: 6820 La Tijera Blvd., Suite 106  
Address: \_\_\_\_\_  
City: Los Angeles State: California ZIP: 90045  
Telephone: 310/645-1088 Fax: 310/645-5531  
Country: United States

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

☐ A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:

Given Name: Bernard Middle Initial: none Family Name: Vallee Suffix: e.g. Jr.  
Inventor's Signature:  Date: 08.17.91  
Residence: City: La Queue en Brie State: \_\_\_\_\_ Country: France FRX Citizenship: France  
Post Office Address: 3, rue de Rome  
Post Office Address: \_\_\_\_\_  
City: La Queue en Brie State: \_\_\_\_\_ ZIP: 94510 Country: France

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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07 SEP 2001

TOTAL P.06

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Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE  
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AUTHORIZATION**Address to:  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Application Number	
Filing Date	
First Named Inventor	
Group Art Unit	
Examiner Name	
Attorney Docket Number	

The undersigned hereby authorizes the practitioner(s) named herein to accept and follow instructions from Christian LEJET

as to any action to be taken in the Patent and Trademark Office regarding the above-identified application without direct contact between the practitioner(s) name herein and the undersigned. In the event of a change in the persons from whom instructions may be taken, the practitioner(s) named herein will be so notified by the undersigned.

☐ Practitioner(s) at Customer Number 

OR

☒ Practitioner(s) named below:Place Customer Number  
Bar Code Label here

Name	Registration Number
Henry M. Bissell	19,200
Henry M. Bissell IV	42,329

This is not a Power of Attorney to the above-named practitioner(s). If appropriate, a separate Power of Attorney to the above-named practitioners should be executed and filed in the Patent and Trademark Office.

I am the:

☒ Applicant☐ Assignee of record of the entire interest  
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name

VALLÉE Bruno

Signature

Date

08.17.01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual user. Any comments on the content of this form you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(Attorney Instruction Authorization (PTO/SB/84) [2-6] page 1 of 1)

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